Public Health Districts

Historical Summary

OPERATING BUDGET	FY 2000	FY 2001	FY 2002	FY 2003	FY 2003
	Actual	Actual	Approp	Request	Gov Rec
BY FUND CATEGORY					
General	8,789,500	9,118,100	10,556,400	10,791,000	9,878,100
Dedicated	0	436,900	506,500	0	0
Total:	8,789,500	9,555,000	11,062,900	10,791,000	9,878,100
Percent Change:		8.7%	15.8%	(2.5%)	(10.7%)
BY OBJECT OF EXPENDITURE					
Personnel Costs	7,034,600	7,555,200	0	0	0
Operating Expenditures	1,754,900	1,968,400	0	0	0
Capital Outlay	0	9,700	0	0	0
Trustee/Benefit	0	21,700	0	0	0
Lump Sum	0	0	11,062,900	10,791,000	9,878,100
Total:	8,789,500	9,555,000	11,062,900	10,791,000	9,878,100

Department Description

The mission of the Public Health Districts is to prevent disease, disability and premature death; to promote healthy lifestyles; and to protect and promote the health and quality of our environment.

Public Health Districts

Comparative Summary

	AGENCY	REQUEST	GOVERNOR'S REC		
Decision Unit	General	Total	General	Total	
FY 2002 Original Appropriation	10,556,400	11,062,900	10,556,400	11,062,900	
Holdback/Neg. Supp	(314,700)	(314,700)	(314,700)	(314,700)	
FY 2002 Total Appropriation	10,241,700	10,748,200	10,241,700	10,748,200	
Expenditure Adjustments	0	0	0	0	
FY 2002 Estimated Expenditures	10,241,700	10,748,200	10,241,700	10,748,200	
Removal of One-Time Expenditures	0	(506,500)	0	(506,500)	
Restore Holdback/Neg. Supp	314,700	314,700	314,700	314,700	
Permanent Base Reduction	0	0	(724,300)	(724,300)	
FY 2003 Base	10,556,400	10,556,400	9,832,100	9,832,100	
Personnel Cost Rollups	54,200	54,200	54,200	54,200	
Inflationary Adjustments	38,200	38,200	0	0	
Nonstandard Adjustments	(8,200)	(8,200)	(8,200)	(8,200)	
Change in Employee Compensation	78,400	78,400	0	0	
Fund Shifts	72,000	72,000	0	0	
FY 2003 Program Maintenance	10,791,000	10,791,000	9,878,100	9,878,100	
Lump-Sum or Other Adjustments	0	0	0	0	
FY 2003 Total	10,791,000	10,791,000	9,878,100	9,878,100	
Change from Original Appropriation	234,600	(271,900)	(678,300)	(1,184,800)	
% Change from Original Appropriation	2.2%	(2.5%)	(6.4%)	(10.7%)	
Change in FTP's		0.00		0.00	

Public Health Districts

Budget by Decision Unit	FTP	General	Dedicated	Federal	Total			
FY 2002 Original Appropriation								
	0.00	10,556,400	506,500	0	11,062,900			
Holdback/Neg. Supp								
General Fund holdbacks, as directed by Executive Orders 2001-10 and 2001-17, are incorporated as a								
negative supplemental appropriatio Agency Request	n for fiscal	(314,700)	0	0	(314,700)			
Governor's Recommendation	0.00	(314,700)	0	0	(314,700)			
FY 2002 Total Appropriation		(3, 7, 2, 2)		· .	(10, 10)			
Agency Request	0.00	10,241,700	506,500	0	10,748,200			
Governor's Recommendation	0.00	10,241,700	506,500	0	10,748,200			
Expenditure Adjustments								
Reflects lump sum allocation and a Income Fund.	djustment	s between objec	ts of expenditures	for the Idaho N	1illennium			
Agency Request	0.00	0	0	0	0			
Governor's Recommendation	0.00	0	0	0	0			
FY 2002 Estimated Expenditures								
Agency Request	0.00	10,241,700	506,500	0	10,748,200			
Governor's Recommendation	0.00	10,241,700	506,500	0	10,748,200			
Removal of One-Time Expenditure								
Removes one-time funding from the				0	(EOC EOO)			
Agency Request Governor's Recommendation	0.00 <i>0.00</i>	0 <i>0</i>	(506,500) (506,500)	0 <i>0</i>	(506,500) (506,500)			
	0.00	0	(300,300)	0	(300,300)			
Restore Holdback/Neg. Supp Restores the one-time holdback/ne	aativa eur	plomontal						
Agency Request	9auve sup 0.00	314,700	0	0	314,700			
Governor's Recommendation	0.00	314,700	0	0	314,700			
Permanent Base Reduction		,			, , , , , , , , , , , , , , , , , , ,			
Agency Request	0.00	0	0	0	0			
Governor's Recommendation	0.00	(724,300)	0	0	(724,300)			
FY 2003 Base								
Agency Request	0.00	10,556,400	0	0	10,556,400			
Governor's Recommendation	0.00	9,832,100	0	0	9,832,100			
Personnel Cost Rollups								
Includes the employer portion of es	timated ch	anges in employ	ee benefit costs.					
Agency Request	0.00	54,200	0	0	54,200			
Governor's Recommendation	0.00	54,200	0	0	54,200			
Inflationary Adjustments								
Includes \$21,700 for a general infla of 3.4%.	tionary inc	crease of 2.1% a	nd \$16,500 for a n	nedical inflation	ary increase			
Agency Request	0.00	38,200	0	0	38,200			
Governor's Recommendation	0.00	0	0	0	0			

Public Health Districts

Budget by Decision Unit	FTP	General	Dedicated	Federal	Total
Nonstandard Adjustments					
Reflects adjustments in Attorney G	General, Sta	ate Controller, ar	nd State Treasure	r fees.	
Agency Request	0.00	(8,200)	0	0	(8,200)
Governor's Recommendation	0.00	(8,200)	0	0	(8,200)
Change in Employee Compensation	on				
Reflects the cost of a 1% salary in	crease for	permanent and g	group positions.		
Agency Request	0.00	78,400	0	0	78,400
The Governor recommends state	employee d	compensation ind	creases to be mad	le from salary s	avings.
Governor's Recommendation	0.00	0	0	0	0
Fund Shifts					
Shifts \$89,300 in contracts and \$6 program support.	9,800 in fe	es to county conf	tributions and the	General Fund f	or continued
Agency Request	0.00	72,000	0	0	72,000
Governor's Recommendation	0.00	0	0	0	0
FY 2003 Program Maintenance					
Agency Request	0.00	10,791,000	0	0	10,791,000
Governor's Recommendation	0.00	9,878,100	0	0	9,878,100
Lump-Sum or Other Adjustments					
Agency Request	0.00	0	0	0	0
Governor's Recommendation	0.00	0	0	0	0
FY 2003 Total					
Agency Request	0.00	10,791,000	0	0	10,791,000
Governor's Recommendation	0.00	9,878,100	0	0	9,878,100
Agency Request					
Change from Original App	0.00	234,600	(506,500)	0	(271,900)
% Change from Original App		2.2%	(100.0%)		(2.5%)
Governor's Recommendation					
Change from Original App	0.00	(678,300)	(506,500)	0	(1,184,800)
% Change from Original App		(6.4%)	(100.0%)		(10.7%)

Public Health Districts Issues & Information

Budget Request by Appropriated & Non-Appropriated Funds

		Approp	Approp	Non-Appropriated			
Decision Unit	FTP	General	Millennium	County	Contracts	Fees	Total
FY 2002 APPROPRIATION	727.16	10,556,400	506,500	6,964,000	13,762,000	12,343,700	44,132,600
Executive Holdback	0.00	(314,700)	0	0	0	0	(314,700)
FTP or Fund Adjustment	2.24	0	0	(321,300)	244,700	1,171,000	1,094,400
FY 2002 ESTIMATE	729.40	10,241,700	506,500	6,642,700	14,006,700	13,514,700	44,912,300
Remove One-Time	0.00	0	(506,500)	0	0	(1,205,400)	(1,711,900)
Restore Holdback	0.00	314,700	0	0	0	0	314,700
Base Reduction							
Agency Request	0.00	0	0	0	0	0	0
Governor's Rec	0.00	(724,300)	0	0	0	0	(724,300)
FY 2003 BASE							
Agency Request	0.00	10,556,400	0	6,642,700	14,006,700	12,309,300	43,515,100
Governor's Rec	0.00	9,832,100	0	6,642,700	14,006,700	12,309,300	42,790,800
Personnel Cost Rollups							
Agency Request	0.00	54,200	0	29,600	66,800	53,200	203,800
Governor's Rec	0.00	54,200	0	29,600	66,800	53,200	203,800
General Inflation							
Agency Request	0.00	21,700	0	22,600	37,700	35,700	117,700
Governor's Rec	0.00	0	0	0	0	0	0
Medical Inflation							
Agency Request	0.00	16,500	0	17,300	29,100	29,800	92,700
Governor's Rec	0.00	0	0	0	0	0	0
Nonstandard Adjustments							
Agency Request	0.00	(8,200)	0	0	0	0	(8,200)
Governor's Rec	0.00	(8,200)	0	0	0	0	(8,200)
CEC							
Agency Request	0.00	78,400	0	42,700	95,800	75,400	292,300
Governor's Rec	0.00	0	0	0	0	0	0
Fund Shifts							
Agency Request	0.00	72,000	0	87,100	(89,300)	(69,800)	0
Governor's Rec	0.00	0	0	87,100	(89,300)	2,200	0
FY 2003 Maintenance							
Agency Request	0.00	10,791,000	0	6,842,000	14,146,800	12,433,600	44,213,400
Governor's Rec	0.00	9,878,100	0	6,759,400	13,984,200	12,364,700	42,986,400
Millennium Fund							
Agency Request	0.00	0	515,200	0	0	0	515,200
Governor's Rec	0.00	0	515,200	0	0	0	515,200
FY 2003 Program Total							
Agency Request	0.00	10,791,000	515,200	6,842,000	14,146,800	12,433,600	44,728,600
Governor's Rec	0.00	9,878,100	515,200	6,759,400	13,984,200	12,364,700	43,501,600
Agency Request - \$ Difference	(727.16)	234,600	8,700	(122,000)	384,800	89,900	596,000
Percent Change	(100.0%)	2.2%	1.7%	(1.8%)	2.8%	0.7%	1.4%
Gov's Rec - \$ Difference	(727.16)	(678,300)	8,700	(204,600)	222,200	21,000	(631,000)
Percent Change	(100.0%)	(6.4%)	1.7%	(2.9%)	1.6%	0.2%	(1.4%)
Idaho Legislative Budget Book			2 - 61			Public H	ealth Districts

Public Health Districts Issues & Information

State Appropriation and County Contribution Summary

1	2	3	4	5	6	7	8
Fiscal	General	Increase/	Percentage	County	Increase/	Percentage	State
Year	Fund	(Decrease)	Change	Fund	(Decrease)	Change	Match
1980	2,080,000	288,100	16.08%	3,035,700	70,310	2.37%	68.52%
1981	2,112,300	32,300	1.55%	3,156,200	120,500	3.97%	66.93%
1982	2,078,100	(34,200)	(1.62%)	3,109,400	(46,800)	(1.48%)	66.83%
1983	2,054,200	(23,900)	(1.15%)	3,149,700	40,300	1.30%	65.22%
1984	1,988,500	(65,700)	(3.20%)	3,247,200	97,500	3.10%	61.24%
1985	2,172,100	183,600	9.23%	3,342,000	94,800	2.92%	64.99%
1986	2,221,500	49,400	2.27%	3,526,800	184,800	5.53%	62.99%
1987	2,313,100	91,600	4.12%	3,631,400	104,600	2.97%	63.70%
1988	2,464,000	150,900	6.52%	3,725,000	93,600	2.58%	66.15%
1989	2,620,000	156,000	6.33%	3,900,000	175,000	4.70%	67.18%
1990	3,008,200	388,200	14.82%	3,973,300	73,300	1.88%	75.71%
1991	4,117,700	1,109,500	36.88%	4,162,700	189,400	4.77%	98.92%
1992	4,093,500	(24,200)	(0.59%)	4,405,600	242,900	5.84%	92.92%
1993	4,270,500	177,000	4.32%	4,624,600	219,000	4.97%	92.34%
1994	5,343,700	1,073,200	25.13%	4,953,600	329,000	7.11%	107.88%
1995	7,049,000	1,705,300	31.91%	5,274,200	320,600	6.47%	133.65%
1996	7,410,500	361,500	5.13%	5,574,500	300,300	5.69%	132.94%
1997	7,729,800	319,300	4.31%	5,774,000	199,500	3.58%	133.87%
1998	7,729,800	0	0.00%	5,845,600	71,600	1.24%	132.23%
1999	8,272,700	542,900	7.02%	6,106,900	261,300	4.47%	135.46%
2000	8,789,500	516,800	6.25%	6,277,000	170,100	2.79%	140.03%
2001	9,118,100	845,400	10.22%	6,535,500	428,600	7.02%	139.52%
2002(E)	10,241,700	1,123,600	12.32%	6,642,700	107,200	1.64%	154.18%
2003(R)	10,791,000	2,248,700	26.32%	6,842,000	485,700	7.64%	157.72%

⁽E) = Current Year Estimate

⁽R) = Budget Request

Public Health Districts Issues & Information

Making A Difference Through Public Health Improvements

Health improvements result in improved quality of life and decreased sick care costs. The Idaho Public Health Districts are responsible for monitoring trends in health outcomes and the impact of contributing factors that influence these outcomes. Currently, twelve outcome indicators are used to monitor our health and the effectiveness of public health services. They were selected from those recommended by the Centers for Disease Control (CDC) as health status indicators that should be monitored by all states and local communities. These indicators include: infant mortality, unintentional injuries, breast and cervical cancer mortality, coronary heart disease mortality, HIV prevalence, sexually transmitted diseases, hepatitis b incidence, pneumonia and influenza mortality, pertussis, tuberculosis incidence, foodborne outbreaks, and waterborne outbreaks. Two other indicators that will be watched closely in the future to determine the need for new efforts by the Public Health Districts are oral health and violent and abusive behavior.

Strategic Planning Act Performance Measures

Year	2000 Objectives & Monitored Outcome Indicators	CY 1997	CY 1998	CY 1999	CY 2000 Standard
1.	Reduce the infant mortality rate (deaths of infants under age one) to no more than 7 deaths per 1,000 live births.	6.9	7.2	6.7	7.0
2.	A. Reduce deaths caused by unintentional injuries to no more than 29.3 per 100,000 people.	40.2	39.8	39.4	29.3
	B. Reduce deaths caused by motor vehicle crashes to no more than 16.8 per 100,000 people.	16.4	18.5	20.9	16.8
3.	A. Reduce breast cancer deaths to no more than than 20.6 per 100,000 women.	18.7	18.9	17.3	20.6
	B. Reduce deaths from cancer of the uterine cervix to no more than 1.3 per 100,000 women.	2.5	2.4	1.5	1.3
4.	A. Reduce coronary heart disease deaths to no more that 100 per 100,000 people.	103.9	94.9	98.1	100.0
	B. Reduce stroke deaths to no more than 20 per 100,000 people.	27.2	26.2	24.8	20.0
5.	Confine the prevalence of HIV infection to no more than 800 per 100,000 people.	46.1	48.9	53.2	800.0
6.	Decrease the number of pertussis cases to less than 75 cases in a given year. (PHD Objective)	614.0	263.0	146.0	75.0
7.	Reduce tuberculosis to an incidence of no more than 3.5 per 100,000 people.	1.2	1.1	1.2	3.5
8.	A. Reduce Chlamydia trachmatis infections to no more than 170 cases per 100,000 people.	138.8	164.3	138.0	170.0
	B. Reduce primary and secondary syphilis to an incidence of no more that 10 cases per 100,000.	2.6	1.2	1.0	10.0
9.	Reduce the incidence of Hepatitis B to no more than 40 cases per 100,000 people.	7.5	9.8	8.4	40.0
10.	Reduce pneumonia and influenza mortality to no more that 8 per 100,000. (PHD Objective)	11.1	11.5	ND	8.0
11.	Reduce foodborne outbreaks to no more that 0.3 per 100,000 people.	0.6	0.4	0.3	0.3

Strategic Planning Act Performance Measures

Year 2000 Objectives & Monitored Outcome Indicators	CY 1997	CY 1998	CY 1999	CY 2000 Standard
12. Determine a statewide baseline measure for	0.0	0.0	0.2	
waterborne outbreaks. (PHD Objective)				

Health District Strategies for Impacting these Indicators

- 1. **Infant Mortality**: The districts will monitor the infant mortality rate for the community and focus on decreasing the number of unintended pregnancies. In addition, health districts will continue to provide Woman, Infant, and Children services (WIC), identify children at-risk for future physical and developmental delays, and provide family planning services.
- 2. **Unintentional Injuries**: The health districts will continue to monitor unintentional death rates. They will also continue to focus on increasing the use of bike helmets, seat belts, and car safety seats.
- 3. **Breast & Cervical Cancer Mortality**: The districts will continue to provide and promote pap smear and mammogram services to low income women.
- 4. **Coronary Heart Disease Mortality**: The districts will continue to focus on tobacco prevention education, nutrition education, and diabetes awareness.
- 5. **HIV Prevention**: The health districts will monitor the HIV prevalence rates in Idaho. In addition, the Districts will focus their HIV testing services on highest-risk clients.
- 6. **Pertussis**: Health districts will monitor the number of pertussis cases statewide while maintaining the the current level of existing services. The focus will be to promote the development of a statewide immunization registry focused on children 0 2 years of age.
- 7. **Tuberculosis Incidence**: Health districts will investigate and provide follow-up for all TB cases; provide surveillance of TB incidence; provide screening and clinical services; provide Directly Observed Therapy (DOT) services for infectious cases; and provide technical assistance to private providers on TB.
- 8. **Sexually Transmitted Disease**: Continue to provide screening, treatment, surveillance, and epidemiological follow-up services for syphilis and chlamydia.
- 9. **Hepatitis B Incidence**: The health districts will continue to monitor hepatitis B incidence rate, provide hepatitis B immunizations while advocating for private providers to also immunize, and participate in the Hepatitis B Perinatal Program.
- 10. Pneumonia & Influenza Mortality: The districts will continue to monitor influenza and pneumonia mortality rates; provide influenza and pneumococcal vaccines, targeting the elderly and persons with chronic disease such as diabetes; educate the community on the importance of at risk persons receiving the vaccines; and advocate for other health care providers to also give the vaccine.
- 11. **Foodborne Outbreaks**: The districts will continue to monitor rates of foodborne outbreaks and incidence of hepatitis A, Giardiasis, and Shigellosis; provide inspections of food establishments and follow-up with those that have violations; monitor the percent of foodborne illness complaints at high-risk food establishments and the number of these establishments with three or more critical item violations; provide training for food service workers; and provide inspections and necessary education and follow-up for all licensed daycares in Idaho.
- 12. **Waterborne Outbreaks**: The health districts will focus on developing a statewide database which ties together the individual components of well testing, failed drainfields, and the pool program with incidence of enteric disease.